



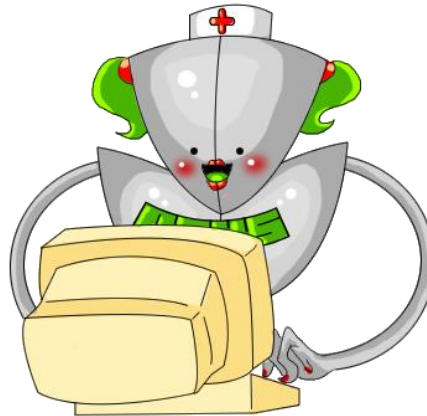
Patient Encounter

- Adding Administered or Historical Immunizations

Reporting Administered and Historical Immunizations

Administered Vaccinations: Vaccinations that were administered by your practice.

Administered vaccinations **must** be entered into ASIIS as an **administered** dose. This process will ensure that lot numbers are subtracted from your inventory in ASIIS.



Select the **View/Add** link from the **Vaccinations** tab to view, edit and add administered vaccinations.

Arizona Department of Health Services

Logged in: DESIREE LONG Date: April 3, 2014

Organization (IRMS)/Facility: TEST PROVIDER - TEST SYSTEM (63928) / TEST PROVIDER - TEST SYSTEM

Patient

Name:	MINNIE MOUSE	SIIS Patient ID:	6712824
Date of Birth:	02/03/2004	Age:	10 yrs
Guardian:	MARGIE MAY MOUSE	Status:	Active

[Print Page](#)

Vaccination View/Add

(* - Historicals , # - Adverse Reaction , !1 - Warning , !2 - Warning , !3 - Warning , +- Unverified Historicals , ^ - Compromised Vaccination)

Documented By: --select--

Double-click in any date field below to enter the default date: 04/03/2014

Vaccine	1	2	3	4	5	6
Hep A 2 dose - Ped/Adol	02/03/2005	08/03/2005				
Hep B - Ped/Adol - presv. free	02/03/2004	03/03/2004	09/05/2004			
IPV	06/03/2004					
Influenza inj quadrivalent pres free 6-35 mos	09/03/2004	10/03/2004				
MMR	03/31/2005	05/07/2008				
Pneumococcal, PCV-13	06/03/2004					
Polio - unspecified	07/03/2004	01/03/2005	02/03/2008			
Tdap	02/03/2011					
Varicella	03/03/2005	04/09/2008				
DTaP						
DTaP/Hep B/IPV						
DTaP/Hib/IPV						
DTaP/IPV						
HPV, quadrivalent						
HPV, bivalent						

Enter the date the vaccine was administered. Once completed, scroll down and click **Add Administered**.

Patient


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Vaccination View/Add

(*- Historicals , #- Adverse Reaction , !1- Warning , !2- Warning , !3- Warning , +- Unverified Historicals , ^ - Compromised Vaccination)

Documented By: --select--

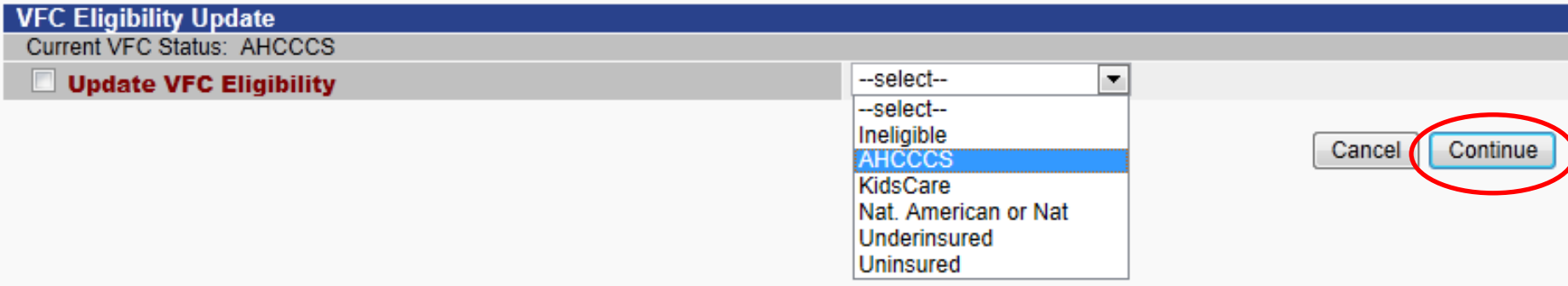
Double-click in any date field below to enter the default date: 04/06/2014  **Quick Tip**

Vaccine	1	2	3	4	5	6
Influ split 6-35 mos pres free						
Influ split 36+ mos pres free	04/06/2014					
Influenza inj quadrivalent pres free 36+ mos						
Influenza, live intranasal, quadrivalent						
Influenza Split						
Influenza split, 6-35 mos.						
Influenza, High Dose						
MMR/Varicella						
Mening. (MCV4O)						
Mening. (MCV4P)	04/06/2014					
Rotavirus, monovalent RV1						
Rotavirus, pentavalent RV5						
--select--						

☐ Do not take ownership when adding vaccinations.

Add Administered

On the next screen you will select the patient's VFC Eligibility status. Choose the correct category for the patient and click **Continue**.



VFC Eligibility Update

Current VFC Status: AHCCCS

☒ **Update VFC Eligibility**

--select--

--select--

Ineligible

AHCCCS

KidsCare

Nat. American or Nat

Underinsured

Uninsured

Cancel Continue

- **Ineligible**- A child that does not qualify for VFC
- **AHCCCS**- A child who is Medicaid eligible. In Arizona, children whose health insurance is covered by the Arizona Health Care Cost Containment System (AHCCCS)
- **KidsCare**- A child who has insurance under AHCCSS but have to pay a deductible
- **Nat. American Indian or Native Alaska**: As defined by the Indian Health Care Improvement Act (25 U.S.C. 1603)
- **Uninsured**: A child who has no health insurance coverage
- **Underinsured**: A child who has health insurance, but the coverage does not include vaccines; a child whose insurance covers only selected vaccines (VFC eligible for non-covered vaccines only). Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC) or under an approved deputization agreement

After updating the patient's VFC eligibility, as part of **dose accountability**, you must link the administered dose to the correct lot number for that vaccine.

Vaccination Detail Add	
Vaccine 2:	influ split 36+ mos pres free
Date Administered:	04/06/2014
Historical:	<input type="radio"/> YES <input checked="" type="radio"/> NO
Manufacturer:	<input type="text"/> Click to select
Lot Number:	<input type="text"/>
Lot Facility:	<input type="text"/>
Publicly Supplied:	<input type="text"/>
Facility:	<input type="text" value="Select..."/>
Vaccinator:	<input type="text" value="Select..."/>
Anatomical Site:	<input type="text" value="Select..."/>
Anatomical Route:	<input type="text" value="Select..."/>
Dose Size:	<input type="text" value="Full"/>
Volume (CC):	<input type="text"/>
VFC Status:	AHCCCS "VFC Status" will be ignored if lot number is not VFC eligible.
District/Region:	<input type="text"/>
VIS Publications Dates:	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>
Date VIS Form Given:	04/03/2014
Comments:	<input type="text"/>

To attach the lot number to the patient's record click within the "**Manufacturer**" box or click on "**Click to Select**".

Next; a pop up window will appear with a list of lot numbers currently in your ASIIS inventory for that vaccine type.

https://stage-asiis.azdhs.gov/select_lot_number.jsp?siis_vaccine_code=606&vaccDate=04/06/2014

Select Lot Number							
Select	Manufacturer	Lot Number	Facility	Pub. Supplied	Expiration Date	Doses Available	Dose Volume
<input type="checkbox"/>	GLAXOSMITHKLINE	7PL45		Y	06/30/2014	45	

After you select the vaccine ASIIS will automatically populate the appropriate information as shown below. Once all required fields have been completed, click **Save**.

By selecting the correct vaccine and lot number the dose will be subtracted from your ASIIS inventory.

Vaccination Detail Add	
Vaccine 2:	Influ split 36+ mos pres free
Date Administered:	04/06/2014
Historical:	<input type="radio"/> YES <input checked="" type="radio"/> NO
Manufacturer:	GLAXOSMITHKLINE Click to select
Lot Number:	7PL45
Lot Facility:	
Publicly Supplied:	Y
Facility:	Sele... ▼
Vaccinator:	Sele... ▼
Anatomical Site:	Select... ▼
Anatomical Route:	Select... ▼
Dose Size:	Full ▼
Volume (CC):	
VFC Status:	AHCCCS 'VFC Status' will be ignored if lot number is not VFC eligible.
District/Region:	
VIS Publications Dates:	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>
Date VIS Form Given:	04/03/2014
Comments:	
<div>Cancel Save</div>	

Clicking save will bring you back to the **Vaccination View/Add screen**. You will now see the vaccination date appear in **blue** as seen below. Dates in blue show vaccines given at your location. To view/edit the vaccination details simply click the date of the vaccination.

Vaccine	1	2	3	4	5	6
DTaP	05/09/2008	08/11/2009	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DTaP/Hep B/IPV	03/31/2008	07/15/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hep A 2 dose - Ped/Adol	03/31/2008	12/12/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hep B - Ped/Adol - presv. free	12/14/2004 *	03/31/2008 *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hib--PRP-T	03/31/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
IPV	03/31/2008 *	05/09/2008	12/12/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influ split 36+ mos pres free	04/06/2014	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MMR	03/31/2008	12/12/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mening. (MCV4P)	04/06/2014	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pneumococcal(PCV-7)	05/09/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Varicella	03/31/2008	12/12/2008	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DTaP/Hib/IPV	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DTaP/IPV	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Historical Vaccinations: Historical vaccines are those which the patient received at a location other than yours.

Reporting in ASIIS: Properly validated documentation of immunization is required (i.e. signed physician reports, blue card).

To enter a vaccination **that was not** administered by your practice, enter the date in an empty box next to the appropriate vaccine and click **Add Historicals** at the bottom of the page.

Patient						
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Guardian:	MARGIE MAY MOUSE		Status:	Active		

[Print Page](#)

Vaccination View/Add						
(*- Historicals , #- Adverse Reaction , !1- Warning , !2- Warning , !3- Warning , +- Unverified Historicals , ^ - Compromised Vaccination)						
Documented By:	--select--					
Double-click in any date field below to enter the default date: 04/03/2014						
Influ split 36+ mos	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influ split 6-35 mos pres free	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influenza Nasal Spray	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influenza Split	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influenza split, 6-35 mos.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Influenza, High Dose	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MMR/Varicella	04/03/2014	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pneumococcal, PCV-13	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Rotavirus, monovalent RV1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Rotavirus, pentavalent RV5	04/03/2014	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tdap	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
--select--	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Once the historical record is successfully recorded, the date will appear in **blue** with a **red** asterisk as shown below. Entering records as historical will not subtract lot numbers from your vaccine inventory in ASIIS.

Vaccination View/Add						
Special considerations on record for patient, please review notes below.						
(*- Historicals , #- Adverse Reaction , !1- Warning , !2- Warning , !3- Warning , +- Unverified Historicals , ^ - Compromised Vaccination)						
Documented By: --select--						
Double-click in any date field below to enter the default date: 03/05/2013						
Vaccine	1	2	3	4	5	6
DTaP	05/09/2008	08/11/2009				
DTaP/Hep B/IPV	03/31/2008	07/15/2008				
Hep A 2 dose - Ped/Adol	03/31/2008	12/12/2008				
Hep B - Ped/Adol - presv. free	12/14/2004 *	03/31/2008 *				
Hib--PRP-T	03/31/2008					
IPV	03/31/2008 *	05/09/2008	12/12/2008			
Influ split 36+ mos pres free	04/06/2014					
MMR	03/31/2008	12/12/2008				
MMR/Varicella	04/03/2014 *					
Mening. (MCV4P)	04/06/2014					
Pneumococcal(PCV-7)	05/09/2008					
Varicella	03/31/2008	12/12/2008				
DTaP/Hib/IPV						
DTaP/IPV						
HPV, quadrivalent						
HPV, bivalent						